

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS STANDARD CERTIFICATE OF BIRTH

State File No. 179
Registered No. 179

1. PLACE OF BIRTH

County Gila State Arizona
District or Township _____ or Village _____
City Globe No. Gila County Hosp St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child John B. Lipton Horne, Jr. { If child is not yet named, make supplemental report, as directed.

3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other _____ 6. Legitimate? Yes 7. Date of birth Oct. 2, 1929
Month Day Year

8. FATHER Full name John B. Lipton Horne 14. MOTHER Full maiden name Veda Lola Oliver

9. Residence (Usual place of abode) Globe Ariz 15. Residence (Usual place of abode) Globe Ariz
If non-resident, give place and state.

10. Color or race White 11. Age at last birthday 24 (Years) 16. Color or race White 17. Age at last birthday 24 (Years)

12. Birthplace (city or place) Texas 18. Birthplace (city or place) Brownsville Texas
(State or country)

13. Occupation Laborer 19. Occupation Housewife
Nature of Industry

20. Number of children of this mother. (Taken as of time of birth of child, herein certified and including this child.) (a) Born alive and now living 1 (b) Born alive but now dead 0 (c) Stillborn 0 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 5:40 P. m. on the date above stated.
(Born alive or stillborn)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.
Signature C. W. Adams Physician or Midwife
(Physician or Midwife)

Given name added from a supplemental report. Address Box 336 Globe, Ariz.
Month, day, year

Filed Nov 9, 1929 L. E. Wyckoff Registrar

185-1002-569